



COMMONWEALTH of VIRGINIA

Department of Health

Office of Licensure and Certification

M. Norman Oliver, MD, MA
State Health Commissioner

TTY 7-1-1 OR
1-800-828-1120

9960 Mayland Drive, Suite 401
Henrico, Virginia 23233-1485
Fax (804) 527-4502

5 September 2018

Virginia T. Slocum
Strategic Planning Operations Manager
Chesapeake Regional Healthcare
736 Battlefield Boulevard, North
Chesapeake, Virginia 23320

RE: COPN Request No. VA-8412
Chesapeake Regional Medical Center, Chesapeake, Virginia
Planning District 20
Establish a mobile PET/CT Service

Dear Ms. Slocum:

This letter is to acknowledge the 4 September 2018 receipt of the letter of intent and enclose the material for your use in filing a certificate of public need (COPN) request for the above-referenced project.

When completing the enclosed application form, you may wish to consult our office, the Division of Certificate of Public Need (DCOPN), in accordance with Part V of the Virginia Medical Care Facilities Certificate of Public Need Rules and Regulations (Regulations).

The Code of Virginia prescribes eight required considerations that provide criteria for the review of COPN applications and Section 32.1-102.3.A of the Code of Virginia requires that COPN decisions "shall be consistent with the most recent applicable provisions" of the State Medical Facilities Plan (SMFP). As a COPN applicant please take note of the SMFP and the eight required considerations and prepare your application accordingly.

The Regulations, the SMFP and the eight required considerations at § 32.1-102.3.B of the Code of Virginia can be found at the following internet addresses respectively.

<https://law.lis.virginia.gov/admincode/title12/agency5/chapter220/section220/>

<https://law.lis.virginia.gov/admincode/title12/agency5/chapter220/section230/>

DIRECTOR
(804) 367-2102

ACUTE CARE
(804) 367-2104

COPN
(804) 367-2126

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1-800-955-1819

LONG TERM CARE
(804) 367-2100

<https://law.lis.virginia.gov/vacode/title32.1/chapter4/>

When filing the application, please submit two signed copies to my attention at the following address:

Virginia Department of Health
Division of Certificate of Public Need
9960 Mayland Drive – Suite 401
Richmond, Virginia 23233

The Code of Virginia at § 32.1-102.6 requires applications to be transmitted to the DCOPN electronically on compact disk data storage media or email to COPN@VDH.Virginia.Gov, by certified mail or a delivery service, return receipt requested, or by hand, with signed receipt to be provided.

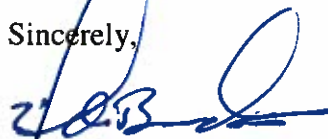
The DCOPN will conduct a preliminary review of the signed application upon receipt to determine its completeness. In accordance with 12 VAC 5-220-290 B, no application will be deemed to be complete for review until the required application fee is paid. The fee schedule is one percent of the proposed expenditure for the project, but no less than \$1,000 and no more than \$20,000. The next review cycle that is available for this project category is scheduled as follows:

BATCH GROUP D/G

Deadline for Submission of Application	October 1, 2018
Deadline for Submission of Any Additional Information Required to Complete Application	November 5, 2018
First Day of Review Cycle	November 12, 2018
Deadline for Completion of DCOPN Review	January 22, 2019
Deadline for Commissioner's Decision (assuming there is no need for an Informal Fact-Finding Conference)	March 11, 2019

Should you have any questions or need further clarification about this review process, please feel free to contact Piero Mannino, the Division of Certificate of Public Need Supervisor, at (804) 367-2137 or by email at Piero.Mannino@VDH.Virginia.Gov.

Sincerely,



Erik Bodin, Director
Division of Certificate of Public Need



**CHESAPEAKE REGIONAL
HEALTHCARE**

VA-8412

rec'd
4 Sep 2018 1610

September 4, 2018

Via First Class Mail and Email (norm.oliver@vdh.virginia.gov)

Dr. M. Norman Oliver
State Health Commissioner
Virginia Department of Health
109 Governor Street, 13th Floor
Richmond, VA 23210

**Re: Letter of Intent – PD 20
Chesapeake Regional Medical Center
Establish Mobile Positron Emission Tomography (PET) Services**

Dear Dr. Oliver:

In accordance with Section 5-220-180 of the Virginia Medical Care Facilities Certificate of Public Need Rules and Regulations, the Chesapeake Hospital Authority d/b/a Chesapeake Regional Health d/b/a Chesapeake Regional Medical Center is requesting a COPN application form for the establishment of mobile PET/CT services within Planning District 20. This letter should serve as an expression of intent to file an application in the Batch Group D review cycle, which begins on November 10.

Please transmit all application forms to me at the following address:

Virginia T. Slocum, Strategic Operations Planning Manager
Chesapeake Regional Medical Center
736 Battlefield Boulevard, North
Chesapeake, VA 23320
Virginia.slocum@chesapeakeregional.com

Should you have any questions, please call me at (757) 312-4150.

Sincerely,

Virginia T. Slocum, PMP
Strategic Planning Operations Manager

cc: Erik Bodin, Director, Division of Certificate of Public Need